



PTO/SB/21 (09-04)
Approved for use through 7/31/2006. OMB 0651-0031
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/538,945
Filing Date	June 13, 2005
First Named Inventor	Masahiro YUHARA
Art Unit	2834
Examiner Name	To Be Assigned
Attorney Docket No.	ARGM-113US

ENCLOSURES (Check all that apply)

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input checked="" type="checkbox"/> Fee Attached

<input checked="" type="checkbox"/> Amendment/Reply
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/Declaration(s)

<input type="checkbox"/> Extension of Time Request

<input type="checkbox"/> Express Abandonment Request

<input type="checkbox"/> Information Disclosure Statement

<input type="checkbox"/> Certified Copy of Priority Document(s)

<input type="checkbox"/> Response to Missing Parts/
Incomplete Application
<input type="checkbox"/> Response to Missing Parts
under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Petition
<input type="checkbox"/> Petition to Convert to a
Provisional Application
<input type="checkbox"/> Power of Attorney, Revocation,
Change of Correspondence
Address
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Request for Refund
<input type="checkbox"/> CD, Number of CD(s) _____
<input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance
Communication to TC

<input type="checkbox"/> Appeal Communication to
Board of Appeals and
Interferences

<input type="checkbox"/> Appeal Communication to TC
(Appeal Notice, Brief, Reply
Brief)

<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Other Enclosure(s) (please
identify below):

➤ Return postcard |
|---|--|---|

Remarks:

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm Name	Battson Prestia		
Signature			
Printed Name	Lawrence E. Ashery		
Date	December 28, 2005	Reg. No.	34,515

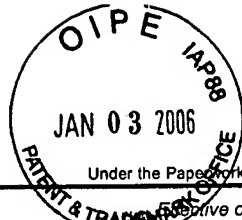
CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or Printed Name	Fran Petrillo	Date	December 28, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, ALEXANDRIA, VA 22313-1450.**

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DPW/1234

PTO/SB/17 (12-04v2) (AW 1/2005)

Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/04.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)**5,910.00**

Complete if Known

Application Number	10/538,945
Filing Date	June 13, 2005
First Named Inventor	Masahiro YUHARA
Examiner Name	To Be Assigned
Art Unit	2834
Attorney Docket No.	ARGM-113US

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: **18-0350** Deposit Account Name: **RatnerPrestia**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**
☒ Charge any additional fee(s) or underpayment of fee(s) ☒ Credit any overpayments
under 37 CFR 1.16 and 1.17

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	—
Design	200	100	100	50	130	65	—
Plant	200	100	300	150	160	80	—
Reissue	300	150	500	250	600	300	—
Provisional	200	100	0	0	0	0	—

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Small Entity	
Fee (\$)	Fee (\$)
50	25
200	100
360	180

Total Claims 91 - 20 or HP = 71 **Extra Claims** 71 **Fee (\$)** \$50. = **Fee Paid (\$)** \$3,550. **Multiple Dependent Claims**

HP = highest number of total claims paid for, if greater than 20 **Fee (\$)** \$360. **Fee Paid (\$)** \$360.

Indep. Claims 13 - 3 or HP = 10 **Extra Claims** 10 **Fee (\$)** \$200. = **Fee Paid (\$)** \$2,000.

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets _____ **Extra Sheets** _____ **Number of each additional 50 or fraction thereof** _____ **Fee (\$)** \$250. **Fee Paid (\$)** _____

_____ - 100 = _____ / 50 = _____ (round up to a whole number) x

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

Fees Paid (\$)

SUBMITTED BY

Complete (if applicable)

Signature	Registration No. Attorney/Agent	34,515	Telephone	(610) 407-0700
Name (Print/Type)	Lawrence E. Ashery		Date	December 28, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Application No.: 10/538,945

ARGM-113US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No: 10/538,945
Applicant: Masahiro YUHARA
Filed: June 13, 2005
Title: METHOD, SYSTEM, AND APPARATUS FOR CONTROLLING
IN-VEHICLE APPARATUS (AS AMENDED)
TC/A.U.: 2834
Examiner: To Be Assigned
Confirmation No.: 7509
Docket No.: ARGM-113US

SUPPLEMENTAL
PRELIMINARY AMENDMENT

Mail Stop Amendment

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Prior to examination, please amend the above-identified application as follows:

- ☒ **Amendments to the Title** begin on page **2** of this paper.
- ☐ **Amendments to the Specification** begin on page _____ of this paper.
- ☒ **Amendments to the Claims** are reflected in the listing of claims which begins on page **3** of this paper.
- ☐ **Amendments to the Drawings** begin on page _____ of this paper and include an attached replacement sheet(s).
- ☐ **Amendments to the Abstract** are on page _____ of this paper. A clean version of the Abstract is on page _____ of this paper.
- ☐ **Remarks/Arguments** begin on page _____ of this paper.

01/04/2006 NGUYEN1 00000013 10538945

01 FC:1201	2000.00 OP
02 FC:1202	3550.00 OP
03 FC:1203	360.00 OP

Amendments to the Title:

Please replace the Title with the following:

METHOD, SYSTEM, AND APPARATUS FOR CONTROLLING IN-VEHICLE APPARATUS